PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/517,938			ing Date 09/2005	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛			OTHER THAN OR SMALL ENTITY		
_	FOR	l N	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	- OK	RATE (\$)	FEE (\$)	
⊠	BASIC FEE (37 CFR 1.16(a), (b), (	_	N/A	LD NO	N/A		N/A	150	i	N/A	TEE (0)	
┢	SEARCH FEF	or (c))	N/A		N/A		21/4		ł			
H	(37 CFR 1.16(k), (i), (i)		N/A		N/A		N/A N/A		ł	N/A N/A		
	(37 CFR 1.16(o), (p), ( FAL CLAIMS		minus 20 =		N/A		x \$ =		OR	x s =		
INE	CFR 1.16(i)) EPENDENT CLAIM	is	minus 20 = *			ł	x s =		l on	x s =		
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	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	sheets of paper, the application s is \$250 (\$125 for small entity) for additional 50 sheets or fraction th 35 U.S.C. 41(a)(1)(G) and 37 CFI									
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))								1			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.							150	1	TOTAL		
	APPI	OED - PART II		OTHER THAN SMALL ENTITY OR SMALL ENTITY								
LN:		(Column 1) CLAIMS		HIGHEST	ST I					ı —		
	02/16/2010	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ĭ	Total (37 CFR 1.18()))	• 41	Minus	<b>~</b> 38	= 3	]	X \$26 =	78	OR	x s =		
AMENDMENT	Independent (37 CFR 1,16(h))	• 3	Minus	<b></b> 3	= 0	1	X \$110 =	0	OR	x s =		
	Application Size Fee (37 CFR 1.16(s))											
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	78	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
INI		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.1601)		Minus		=	1	x \$ =		OR	x s =		
No.	Independent (37 CFR 1,16(h))		Minus	***	-	1	x \$ =		OR	x \$ =		
AMENDMENT	Application Size Fee (37 CFR 1.16(s))					1			1			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR			
									OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

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